STATE OF ARIZONA

DEC 5 2000

DEPARTMENT OF INSURANCE

DEPT. OF INSURANCE

Docket No. 00A-194-INS

CONSENT ORDER

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In the Matter of:
United States Fidelity and Guaranty Company,

nited States Fidelity and Guaranty Company
NAIC #25887

Fidelity and Guaranty Insurance Underwriters, Inc., NAIC #25879

Respondents

Examiners for the Department of Insurance (the "Department") conducted a market conduct examination of United States Fidelity and Guaranty Company ("USFG") and Fidelity and Guaranty Insurance Underwriters, Inc ("FGIU"). These are referred to collectively as "Respondents." In the Report of the Examination, the Examiners have alleged that Respondents have violated A.R.S. §§ 20-157, 20-263, 20-357, 20-385, 20-400.01, 20-461, 20-1631, 20-1632.01, 20-1677, 23-906, 23-961, and A.A.C. R20-6-801(H)(1)(b).

Respondents wish to resolve this matter without formal proceedings, admit that the following Findings of Fact are true, and consent to the entry of the following Conclusions of Law and Order.

FINDINGS OF FACT

- Respondents are authorized to transact property and casualty insurance, including workers' compensation, pursuant to Certificates of Authority issued by the Director.
- 2. The Examiners were authorized by the Director to conduct a market conduct examination of Respondents, covering the time period from January 1, 1994 through September 27, 1996. The on-site examination was concluded on September

27, 1996. Based on the findings the Examiners prepared the "Report of Examination of the Market Conduct Affairs of Respondents" dated September 27, 1996.

- 3. The Department previously conducted a market conduct examination of Respondents. The on-site examination was concluded as of January 29, 1988. As a result, a Consent Order (the "1988 Order"), was filed by the Director on May 19, 1988, Docket No. 6687. The 1988 Order stated in part as follows:
 - 1. Respondent[s] shall cease and desist from failing to include the amount of applicable taxes and fees that would be required to purchase comparable automobiles in its cash settlements of first party total loss claims. . . .
 - 3. Respondent[s] shall cease and desist from failing to adhere to all requirements of the NCCI's [Schedule Rating] Plan in those companies in which it has adopted the Plan.
 - 4. Respondent[s] shall cease and desist from failing to document the facts supporting adjustment made to the full manual premium developed for risks in its commercial lines policies.
- 4. The Examiners reviewed 24 first party automobile total loss claims settled by FGIU with loss dates from May 1, 1994 through August 11, 1996, and found that FGIU failed to pay four claimants a total of \$157.55 for applicable taxes, license fees, and other fees incident to transfer of evidence of ownership of a comparable automobile.
- 5. The Examiners reviewed 158 personal automobile policies issued by Respondents that had effective dates from January 1, 1994 through June 30, 1996 and found as follows:
- a. FGIU issued 89 policies which included the superseded 2/93 edition of the Arizona Cancellation Endorsement rather than the currently filed 12/94 edition.

- b. FGIU failed to use the correct language on Arizona Cancellation Endorsements issued with all 158 policies.
- c. FGIU applied an unfiled premium increase of five percent to the physical damage component in rating 25 policies.
- d. FGIU increased the premiums of eight policies as the result of accidents, but did not notify the insureds of the reasons for the premium increases.
- e. FGIU failed to provide evidence of the cancellation notices sent to 11 of the 56 insureds whose policies were cancelled for nonpayment of premium.
- f. FGIU terminated 45 policies for non-payment of premium without sending notices of cancellation to the insureds on the effective dates of cancellation after the seven-day grace period.
- 6. Workers' compensation ("WC") insurers are required by statute to belong to a WC rating organization and to adhere to its rates unless the insurer has filed deviations from these rates. Respondents are members of the National Council on Compensation Insurance ("NCCI"), a duly licensed rating organization in Arizona. Any reference in this Order to Respondents' filed rates and rules includes rates and rules filed by the NCCI on Respondents' behalf.
- 7. The NCCI's Schedule Rating Plan ("Plan") was approved for use in Arizona July 8, 1982 by the Director. Effective October 1, 1988, the Plan was amended to require insurers to include within each workers compensation policy file a completed schedule rating worksheet and loss prevention survey. An insurer may apply either the schedule rating plan or a deviation from the rates filed by the NCCI, but not both.

FGIU adopted the Plan on September 2, 1982. Effective July 1, 1995, FGIU withdrew from the Plan and adopted a 15% deviation. USFG adopted the Plan effective January 20, 1988.

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Information Page of two policy files.

- k. USFG did not send notice of cancellation/nonrenewal to one insured after the policy was cancelled/nonrenewed.
- I. USFG rated one policy on the basis of rates other than those filed with the Department. As a result, the insured was overcharged by \$25.00.
- 9. Respondents are members of the Insurance Services Office ("ISO"), a property and casualty (P&C) rating organization duly licensed by the Department to file rates on behalf of its members. ISO files rates on behalf of Respondents. Respondents have filed with the Department various deviations from the ISO filings as well as having filed independent filings of their own.
- 10. The Examiners reviewed 215 commercial package and commercial automobile policies issued by Respondents which had effective dates from January 1, 1994 through June 30, 1996, and found as follows:
- a. Respondents failed to include adequate documentation in support of the schedule credits or debits given on 11 policies/coverage parts (USFG, 5; FGIU, 6).
- b. Respondents failed to include adequate documentation in support of the changes in schedule credits or debits from year to year on nine policies/coverage parts (USFG, 4; FGIU, 5).
- c. FGIU applied schedule credits to two policies for which the risks were not eligible. As a result, the insureds were undercharged by a total of \$36.
- d. Respondents issued four policies where schedule credits were allowed in excess of the 25% maximum permitted by their filed rates and rules (FGIU, 2; USFG, 2). As a result, the insureds were undercharged by a total of \$11,350.00.

- e. USFG issued one policy without applying experience rating, although the risk qualified for experience rating. As a result, the insured was overcharged by \$2,068.
- f. Respondents issued three policies in companies other than as determined according to their underwriting guidelines (FGIU, 2; USFG, 1). As a result, Respondents may have discriminated in favor of or against these insureds.
- g. USFG issued one policy in its Business owners Program although the risk was not eligible for that program.
- h. FGIU failed to send notices of premium increase to one insured whose rates were increased, at least 60 days in advance of the effective dates.
- USFG reduced the premium of one policy in order to meet the amount quoted by its agent. As a result, the insured was undercharged by \$134.
- j. USFG failed to apply the package modifier determined according to its filed rates and rules to one policy. As a result, the insured was overcharged by \$35.00.
- k. FGIU applied a deviation other than its filed deviation to one policy. As a result, the insured was overcharged by \$269.00.
- I. USFG classified four risks other than according to its filed rules. As a result, one insured was undercharged by \$274.00. The Examiners were unable to determine premium differences as to the other insureds.
- m. USFG issued two policies rated other than on the basis of its filed rates and rules. The Company was unable to provide evidence of how the premium was developed. As a result, the insureds paid were undercharged by a total of \$229.00.

- n. USFG issued a policy for three terms using unfiled "a" rates. As a result, the insured was undercharged for one policy term \$259 and overcharged for two policy terms \$274.00.
- o. Respondents issued two policies which were not rated for all coverages or exposures (USFG,1; FGIU, 1). As a result, one insured was undercharged by \$1,660.00. The Examiners were unable to determine the premium difference for the other policy.
- 11. Respondents are members of the Surety Association of America ("SAA"), a licensed rating bureau, and utilize rates and rules filed by SAA as well as their own deviations from the SAA rates and rules. Respondents have also filed a \$100 minimum premium for surety bonds, other than contract bonds.
- 12. The Examiners reviewed 2,200 surety bonds issued by USFG, and found that USFG issued 67 bonds at rates other the rates filed by SAA on Respondents' behalf. As a result, 15 insureds were overcharged by a total of \$3,681.
- 13. After the conclusion of this examination, USF&G and FGIU merged with the St. Paul Insurance Cos. ("the St. Paul"). On October 1, 1999, the St. Paul sold its personal lines operations, including the FGIU and USF&G personal lines policies to Metropolitan Life Insurance Company ("Met Life").
- 14. The St. Paul has forwarded a copy of the sections of this examination, related to the personal lines policies, to Met Life.

CONCLUSIONS OF LAW

1. FGIU violated A.A.C. R20-6-801(H)(1)(b), A.R.S. § 20-461(A)(6), and the 1988 Order by failing to pay first-party claimants for all applicable taxes, license fees, and other fees incident to transfer of evidence of ownership of comparable automobiles.

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- FGIU and USFG violated A.R.S. § 20-462(A) by failing to pay interest on 2. claims that were not paid within 30 days of receipt of an acceptable proof of loss.
- FGIU violated A.R.S. § 20-1631(C)(5) by issuing notices of cancellation 3. that did not include all language required by law.
- FGIU violated A.R.S. § 20-385(A) by determining personal automobile 4. premiums other than according to their filed rates and rules.
- 5. FGIU violated A.R.S. § 20-263(A) by increasing the premium of automobile policies as the result of accidents without documenting that the insureds were substantially at fault.
- 6. FGIU violated A.R.S. § 20-157(A) by failing to provide evidence of the cancellation notices in order to verify proof of mailing and compliance with the seven day grace period pursuant to A.R.S. § 20-1632.01.
- FGIU violated A.R.S. § 20-1632.01(B) by failing to send notices of 7. cancellation or non-renewal to personal auto insureds for non-payment of premium after the seven-day grace period on the effective date of cancellation.
- 8. FGIU and USFG, violated A.R.S. § 20-400.01(B) and the 1988 Order by making adjustments to full manual premium developed for workers' compensation policies without adequate documentation in justification of the adjustments.
- USFG violated A.R.S. § 20-400.01(A) by determining the premiums of 9. workers' compensation policies other than on the basis of its rates and rules filed pursuant to A.R.S. § 20-357(A).
- FGIU and USFG violated A.R.S. § 20-357(E) by failing to send copies of 10. schedule rating worksheets to the NCCI as required by the Schedule Rating Plan.

- 11. USFG violated A.R.S. § 20-357(E) and the 1988 Order by failing to obtain loss control reports within 90 days of the effective dates of policies, as required by the Schedule Rating Plan.
- 12. FGIU and USFG violated A.R.S. § 23-961(F) by failing to notify the ICA of policy issuance, renewal, cancellation, nonrenewal or reinstatement at least thirty days prior to the effective date.
- 13. USFG violated A.R.S. § 20-400.01(D) and 23-906 by failing to obtain and maintain copies of written notices by employees rejecting workers compensation coverage.
- 14. FGIU and USFG violated A.R.S. § 20-357(E) by failing to include risk identification numbers and carrier identification numbers on policy information pages.
- 15. USFG violated A.R.S. § 23-961(F) by failing to notify one insured of policy cancellation/nonrenewal in writing.
- 16. USFG violated A.R.S. §§ 20-357(E) and 20-400.01(A) by rating one policy on the basis of rates other than those filed with the Department.
- 17. USFG and FGIU violated A.R.S. § 20-400.01(B) and the 1988 Order by making adjustments to full manual premium developed for commercial package and commercial automobile policies without adequate documentation to justify the adjustments.
- 18. USFG and FGIU violated A.R.S. § 20-400.01(A) by determining the premiums of commercial package and commercial automobile policies, and surety bonds, other than on the basis of its rates and rules filed pursuant to A.R.S. § 20-385
- 19. FGIU violated A.R.S. § 20-1677(A) by failing to send notice of premium increase at least 60 days before policy expiration to a commercial package and commercial auto insured.

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- 20. USFG violated A.R.S. § 20-400.01(D) by failing to provide evidence of the development of premiums to the Examiners.
- 21. Grounds exist for the entry of the following Order pursuant to A.R.S. §§ 20-220, 20-400.01 and 20-456.

ORDER

IT IS ORDERED THAT:

- 1. Respondents shall cease and desist from the following acts:
- Failing to include adequate documentation in support of schedule credits/debits given workers' compensation insureds, including changes from year to year;
- b. Failing to document that workers' compensation risks eligible for schedule rating have been so considered.
- Failing to send copies of workers' compensation schedule rating worksheets to the NCCI;
- d. Failing to obtain loss control reports within 90 days of the effective dates of policies, as required by the Schedule Rating Plan;
- e. Failing to notify the ICA of workers' compensation policy issuance, renewal, cancellation, nonrenewal, or reinstatement;
- f. Failing to include signed right to rejection forms in workers' compensation policies when certain employees are excluded from coverage;
- g. Failing to include risk identification numbers and carrier identification numbers on workers' compensation policy information pages;
- h. Failing to notify insureds of policy cancellation/nonrenewal in writing;

- i. Rating and determining the premiums of commercial package,
 business owners, commercial automobile policies, and surety bonds other than
 pursuant to filed rates and rules;
- j. Failing to include adequate documentation in support of schedule credits/debits given commercial package, business owners and commercial automobile insureds, including changes from year to year;
- k. Failing to pay interest on all claims not paid within 30 days of receipt of an acceptable proof of loss.
- Failing to send notice of premium increase at least 60 days before policy expiration;
 - m. Failing to provide evidence regarding development of premiums;
- 2. Within 90 days of filed date of this Order, Respondents shall submit to the Arizona Department of Insurance, for approval, evidence that the following corrections have been implemented and communicated to the appropriate personnel. Evidence of corrective action and communication thereof includes but is not limited to memos, bulletins, E-mails, correspondence, procedures manuals, print screens and training materials.
- a. Institute or modify procedures to ensure compliance with A.R.S. § 20-400.01(B) regarding the failure to include adequate documentation in support of schedule credits/debits given workers' compensation insureds, including changes from year to year.
- b. Institute or modify procedures to ensure compliance with A.R.S. § 20-400.01(A) regarding the failure to document that workers' compensation risks eligible for schedule rating have been so considered.

	C.	Institute or modify procedures to ensure compliance with A.R.S. §
20-357(E) re	egardinç	g the failure to send copies of workers' compensation schedule rating
worksheets	to the N	ICCI.

- d. Institute or modify procedures to ensure compliance with A.R.S. § 20-357(E) regarding the failure to obtain loss control reports within 90 days of the effective dates of policies, as required by the Schedule Rating Plan.
- e. Institute or modify procedures to ensure compliance with A.R.S. § 23-961(F) regarding the failure to notify the ICA of workers' compensation policy issuance, renewal, cancellation, nonrenewal, or reinstatement.
- f. Institute or modify procedures to ensure compliance with A.R.S. §§ 20-400.01(D) and 23-906 regarding the failure to include signed right to rejection forms in workers' compensation policies when certain employees are excluded from coverage.
- g. Institute or modify procedures to ensure compliance with A.R.S. § 20-357(E) regarding the failure to include risk identification numbers and carrier identification numbers on workers' compensation policy information pages.
- h. Institute or modify procedures to ensure compliance with A.R.S. § 23-961(F) regarding the failure to notify insureds of policy cancellation/nonrenewal in writing.
- i. Institute or modify procedures to ensure compliance with A.R.S. §§ 20-357(E) and 20-400.01(A) regarding the issuance of commercial package, business owners, and commercial automobile policies other than on the basis of filed rates and rules.
- j. Institute or modify procedures to ensure compliance with A.R.S. § 20-400.01(B) regarding the failure to include adequate documentation in support of

schedule credits/debits given commercial package, business owners, and commercial automobile insureds, including changes from year to year.

- k. Institute or modify procedures to ensure compliance with A.R.S. § 20-400.01(A) regarding the failure of determining the premiums of commercial package, commercial automobile, and surety bonds insureds other than on the basis of its rates and rules filed pursuant to A.R.S. § 20-385(A).
- I. Institute or modify procedures to ensure compliance with A.R.S. § 20-1677(A) regarding the failure to send notice of premium increase at least 60 days before policy expiration.
- m. Institute or modify procedures to ensure compliance with A.R.S. §
 20-400.01(D) regarding the failure to provide evidence of the development of premiums to the Department.
- n. Institute or modify procedures to ensure compliance with A.R.S. § 20-448(C) regarding unfairly discriminating between insureds by calculating premiums of certain insureds differently than those of other insureds having substantially like insuring, risk, and exposure factors, and expense elements.
- 3. Within 90 days of the filed date of this Order, Respondents shall refund the amount of \$6,352.00, plus interest at the rate of 10% per annum from the date of the overcharge to the date of the refund, to the insureds listed in Exhibit A of this Order.
- 4. Each payment made pursuant to paragraphs 3 and 4 above shall include a letter to the insured in a form previously approved by the Director. A list of payments, giving the name and address of each party paid, the amount of the payment, the amount of interest paid, and the date of payment, shall be provided to the Department within 90 days of the filed date of this Order.

- 5. The Department shall be permitted, through authorized representatives to verify that Respondents has complied with all provisions of this Order.
- 6. Respondents shall pay civil penalties totaling \$15,000.00 to the Director for deposit in the State General Fund in accordance with A.R.S. § 20-220(B), as follows: FGIU, \$11,250; USF&G, \$3,750. These civil penalties shall be provided to the Market Conduct Examinations Division of the Department prior to the filing of this Order.
- 7. The Report of Examination of the Market Conduct Affairs of Respondents as of September 27, 1996, including the letter submitted in response to the Report of Examination, shall be filed with the Department after the Director has filed this Order. DATED at Phoenix, Arizona this day of December, 2000.

Charles R. Cohen Director of Insurance

CONSENT TO ORDER

- Respondents, United States Fidelity and Guaranty Company and Fidelity 1. and Guaranty Insurance Underwriters, Inc., have reviewed the foregoing Order.
- 2. Respondents admit the jurisdiction of the Director of Insurance, State of Arizona, admit the foregoing Findings of Fact, and consent to the entry of the Conclusions of Law and Order.
- Respondents are aware of the right to a hearing, at which they may be 3. represented by counsel, present evidence, and cross-examine witnesses. Respondents irrevocably waive the right to such notice and hearing and to any court appeals related to this Order.
- Respondents state that no promise of any kind or nature whatsoever was 4. made to them to induce them to enter into this Consent Order and that they have entered into this Consent Order voluntarily.
- 5. Respondents acknowledge that the acceptance of this Order by the Director of the Arizona Department of Insurance is solely for the purpose of settling this matter and does not preclude any other agency or officer of this state or its subdivisions or any other person from instituting proceedings, whether civil, criminal, or administrative, as may be appropriate now or in the future.
- 6. Bruce Backberg , who holds the office of Senior Vice President of Respondents, is authorized to enter into this Order for them and on their behalf.

UNITED STATES FIDELITY AND GUARANTY COMPANY FIDELITY AND GUARANTY INSURANCE UNDERWRITERS, INC.

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EXHIBIT A

Worker's Compensation

United States Fidelity and Guaranty Company

Violation of A.R.S. § 20-357(E) and 20-400.01(A)

Policy #

Overcharge

\$6,352.00

1910192958

\$25.00

Commercial Package

Violation of A.R.S. § 20-385 and 20-400.01(A)

Fidelity and Guaranty Insurance Underwriters, Inc.

Policy # Overcharge IMP30064494902 \$269.00

United States Fidelity and Guaranty Company

Policy #	Overcharge	
IMP30005319305	\$96.00	
IMP30005319304	\$178.00	
IMP30037940901	\$35.00	
BSC30004695600	\$2,068.00	
	\$2,377.00	

Surety Bonds

United States Fidelity and Guaranty Company

Violation of A.R.S. § 20-385(A) and 20-400.01(A)

policy#	Date	overcharge
36011010358934	08/10/94	\$13.00
36011010358934	08/10/95	\$13.00
43013025497955	01/31/95	\$400.00
43013025497955	01/31/96	\$400.00
01013010697880	03/14/94	\$50.00
41013010842935	12/13/94	\$295.00
41013010842935	12/13/95	\$295.00
72011010304913	07/01/94	\$300.00
72011010304913	07/01/95	\$300.00
56011011571928	11/20/94	\$340.00
72011010635875	07/17/94	\$450.00
72011010635875	07/17/95	\$450.00
52013010411892	04/12/94	\$125.00
52013010411892	04/12/95	\$125.00
52013010411892	04/12/96	\$125.00
REFUNDS DUE:		\$3,681.00

TOTAL REFUNDS DUE:

2	COPY of the foregoing mailed/delivered This5th_ day of 2000, to:
3	December 2000, to.
3	Sara Begley
4	Deputy Director
	Paul J. Hogan
5	Chief Market Conduct Examiner
6	Market Conduct Examinations Section Mary Butterfield
O	Assistant Director
7	Consumer Affairs Division
	Deloris E. Williamson
8	Assistant Director
9	Rates & Regulations Division
,	Steve Ferguson
10	Assistant Director
	Financial Affairs Division Alexandra Shafer
11	Assistant Director
12	Life and Health Division
	Nancy Howse
13	Chief Financial Examiner
- 4	Terry L Cooper
14	Fraud Unit Chief
15	DEDARTMENT OF INCURANCE
	DEPARTMENT OF INSURANCE 2910 North 44th Street, Suite 210
16	Phoenix, AZ 85018
17	THE STIRK, 7 12 000 10
Ι,	
18	
	Emmanuel Munson-Regala, Senior Corporate Counsel
19	United States Fidelity and Guaranty Company
20	Fidelity and Guaranty Insurance Underwriters, Inc. 385 Washington Street
	St. Paul, MN 55102-1396
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